

AUTOPSY REPORT

Case Number:

October 3, 2017

AUTOPSY REPORT

PATHOLOGICAL EXAMINATION ON THE BODY OF



PATHOLOGIC DIAGNOSES

- I. Gunshot wound of back.
- II. Status post resuscitative efforts.

OPINION

Based on the autopsy findings and the circumstances surrounding the death, as currently understood, the cause of death is gunshot wound of back, and the manner of death is Homicide.

CAUSE OF DEATH:

is year-old female,

died as a result of gunshot wound of

hack

MANNER OF DEATH:

HOMICIDE.

JUNNIFER CORNEAL, M.D. Borensic Pathologist

JC/kra/ag

Date signed: 12/20/17



AUTOPSY REPORT

Case Number:

October 3, 2017

POSTMORTEM EXAMINATION ON THE BODY OF



Date of death:

0645 hours on October 2, 2017

Date of autopsy: 2145 hours on October 3, 2017

IDENTIFICATION: The body is identified by a tag on the right great toe bearing the decedent's name and case number.

WITNESSES: Assisting is Forensic Technician Brieanna. There are no outside observers.

CLOTHING: The body is unclad when initially viewed. No clothing accompanies the body.

EVIDENCE OF MEDICAL THERAPY:

- 1. Triple lumen intravascular catheter in the subclavian area.
- 2. Bilateral chest tubes.
- 3. 15 \times 1/16 inch stapled incision across the midchest.
- 4. A 12 inch long open abdominal incision with wound V.A.C. placement.
- 5. Urinary catheter with less than 5 ml of urine in the reservoir.
- 6. Single lumen intravascular catheters in the groin area bilaterally.

EXTERNAL EXAMINATION

Injuries are described in a separate section below.

GENERAL: The body is that of a normally developed and well-nourished age of years. The length is 68 inches, and the weight is 161 pounds as received. The body is well preserved, cold, and has not been embalmed. Rigidity is fully developed in the jaw and extremities. Lividity is pink-purple, nonblanching, and in a posterior distribution.

<u>HEAD</u>: The scalp is covered with brown hair measuring up to 13 inches on the top of the head. The ears are normally formed and



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without drainage. The earlobes are pierced. The irides are blue, the corneas are clear, and the bulbar and palpebral conjunctivae are free of petechiae. The sclerae are white. The nose is intact, and the nares are clean and unobstructed. The lips are normally formed. The teeth are natural and in good condition.

NECK: The neck is symmetrical and without injury.

<u>CHEST AND ABDOMEN</u>: The chest is normally formed, symmetrical, and without palpable masses. The breasts are symmetrical, and without palpable masses.

The abdomen is received with open wound V.A.C. covering.

EXTERNAL GENITALIA: The atraumatic external genitalia are those of an adult female.

BACK: The back is straight and symmetrical. The anus is atraumatic.

ARMS: The arms are normally formed. No track marks or ventral wrist scars are noted. The fingernails are cut short and clean and painted pink.

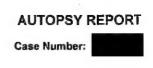
LEGS: The legs are normally formed and have no edema, amputations, or deformity. The toenails are short, trim, and painted pink.

BODY MARKINGS (SCARS AND TATTOOS): Scars: None identified.

Tattoos:

- 1. A monochromatic tattoo of a heart on the left lower abdomen.
- 2. Multiple butterflies on the right back.





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INJURIES, EXTERNAL AND INTERNAL

There is a penetrating gunshot wound of the back. The directions are stated with reference to the standard anatomic positions.

PENETRATING GUNSHOT WOUND OF BACK:

ENTRANCE: There is an entrance gunshot wound on the left midback. It is centered 19-1/2 inches below the top of the head and 1-3/4 inches left of midline. It is a 1/8 inch diameter circular defect with a 1/16 inch rim of abrasion. No soot or stippling is identified.

PATH: The projectile enters the mid left back, perforates the spine at the level of T10-T11, injures the spinal cord and comes to rest in the right chest cavity. There is associated residual hemothorax on the right. The lower lobe of the right lung has been resected.

PROJECTILE/SITE OF LODGEMENT: A metallic projectile is recovered from the right chest cavity underlying the right lung.

DIRECTION: Back-to-front, left-to-right and without significant up/down deviation.

OTHER INJURIES:

There are anterior rib fractures associated with cardiopulmonary resuscitative efforts.

INTERNAL EXAMINATION

BODY CAVITIES: The abdominal fat layer measures up to 2.5 cm in thickness. There is a residual right hemothorax as described above. Numerous surgical towels are removed from the right thoracic cavity and the right side of the abdomen. There is gauze within a defect in the thoracic spine. The organs are normally



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located with the exception of a partial resection of the lower lobe of the right lung.

CARDIOVASCULAR SYSTEM: The heart weighs 240 grams and is not enlarged. It has a normal shape with a smooth, glistening epicardium. The coronary arteries have a normal origin and distribution with right dominance. The coronary arteries have less than 10% yellow atherosclerotic stenosis.

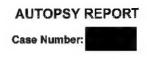
The myocardium is red-brown, firm, and uniform without focal fibrosis, softening, or hyperemia. The ventricles are not dilated or hypertrophied. The right ventricle, left ventricle, and interventricular septum measure 0.3 cm, 0.9 cm, and 1.0 cm, respectively.

The endocardium is intact, smooth, and glistening. The cardiac valve leaflets are of normal number, pliable, intact, and free of vegetations. The atrial and ventricular septa are free of defects.

The aorta follows its usual course and has minimal atherosclerotic changes in the aorta. There are no vascular anomalies or aneurysms. The vena cavae and pulmonary arteries are without thrombus or embolus.

RESPIRATORY SYSTEM: See Injuries External and Internal. The right and left lungs weigh 580 and 850 grams, respectively, and have the usual lobation. The pleura are smooth and glistening with surgical staple lines along the lower lobe of the right lung. The lungs have minimal anthracotic pigment. The left lung is congested and edematous. The right lung is well expanded and crepitant. The parenchyma is dark red and exudes moderate amounts of fluid. The lungs have no consolidation, hemorrhage, infarct, tumor, gross fibrosis, or enlargement of airspaces. The bronchi contain no foreign material and have tan-pink mucosa.





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HEPATOBILIARY SYSTEM: The liver weighs 1100 grams. The intact capsule is smooth and glistening. The parenchyma is red-brown and uniform without mass, hemorrhage, yellow discoloration, or palpable fibrosis.

The gallbladder contains an estimated 5 ml of bile and no stones. Its mucosa is uniform and the wall is not thickened.

The pancreas has a normal size, shape, and lobulated structure. The parenchyma is yellow, firm and uniform.

HEMOLYMPHATIC SYSTEM: The spleen weighs 100 grams. The capsule is smooth and intact. The parenchyma is maroon, firm, and uniform.

There is no enlargement of the lymph nodes in the neck, chest, or abdomen.

ENDOCRINE SYSTEM: The thyroid gland is not enlarged, and the lobes are symmetrical. The parenchyma is uniform, firm, and redbrown.

The adrenal glands have the usual size and shape. The cortices are thin, uniform, and yellow and there is no hemorrhage or tumor.

GASTROINTESTINAL SYSTEM: The esophagus and gastroesophageal junction are unremarkable. The stomach contains approximately 100 ml of food material without visible pills or pill residue. The gastric and duodenal mucosae are intact and unremarkable. The small and large intestines and appendix are unremarkable to inspection and palpation.

GENITOURINARY SYSTEM: The right and left kidneys weigh 120 and 130 grams, respectively, and have a normal shape and position. The cortical surfaces are smooth. The kidneys have the usual corticomedullary structure without tumors or cysts. The pelves and ureters are not dilated or thickened. The bladder contains no



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urine. The mucosa is intact, and the bladder wall is not hypertrophied.

The uterus, tubes, and ovaries are unremarkable. The cervix is patent with a circular os. The myometrium is uniform and the endometrium is unremarkable. The sectioned ovaries are unremarkable. The vagina is unremarkable. A birth control device is identified in the vagina.

NECK: The tongue, strap muscles, and other anterior neck soft tissues have no hemorrhage. The hyoid bone and the cartilaginous structures of the larynx and trachea are normally formed and without fracture. The airway is unobstructed, lined by smooth, pink-tan mucosa, and contains no foreign material. The cervical vertebrae have no displacement, hypermobility, or crepitus.

MUSCULOSKELETAL SYSTEM: The musculoskeletal system is well developed and free of deformity. The ribs are not brittle. The skeletal muscle is dark red and firm.

<u>HEAD</u>: The scalp is free of hemorrhage. The calvarium and base of the skull are normally configured and have no fractures. The dura is intact, and there is no epidural or subdural hemorrhage.

CENTRAL NERVOUS SYSTEM: The unfixed brain weighs 1470 grams. The leptomeninges are glistening and transparent without underlying hemorrhage, exudate, or cortical contusions. The hemispheres are symmetrical and have a normal gyral pattern. There is no flattening of the gyri, narrowing of the sulci, midline shift, or evidence of herniation. The arteries at the base of brain have no atherosclerotic changes or aneurysms.

Sections through the cerebral hemispheres have a uniform, intact cortical ribbon and uniform white matter. The basal ganglia, thalami, hippocampi and other internal structures are symmetrical and without focal change. The ventricles are not enlarged, and the linings are smooth and glistening. Sections of the brainstem and cerebellum show an intact structure without focal lesions.





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SPECIMENS RETAINED

HISTOLOGY: Representative sections of organs and tissues are retained.

PHOTOGRAPHS: Digital identification photographs, overall external body photographs, and photographs of injuries and projectile are taken.

RADIOGRAPHS: Full body radiographs are taken and show numerous medical devices in place and a metallic fragment in the right chest area.